

What to Look For When You Are Looking for a Nursing Home: A Checklist

Should you decide on nursing home care, you may want to visit one or more facilities before making your final choice. This checklist can be used when you visit a nursing home to see how well the nursing home meets your needs.

RESIDENTS

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Do residents appear generally happy?				
2. Are residents clean and well-groomed?				
3. Do residents find life in the nursing home acceptable? (Talk with a few residents)				
4. Are residents wearing appropriate clothing?				
5. Does the home limit the use of physical restraints?				
6. What is the policy to determine if a resident needs restraints (e.g., lap belts on wheelchairs)?				

RESIDENT ROOMS

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Where will the prospective resident's room be located?				
2. Will it meet the prospective resident's needs?				
3. Are rooms homelike, cheerful, clean and well lit?				
4. How many residents share a room?				
5. Can prospective residents meet their roommates to determine compatibility?				
6. Are private rooms available?				
7. Are the policies on room changes acceptable to the prospective resident?				
8. Will the room and bed be held if the resident requires hospitalization?				
9. Can spouses share a room?				
10. Does each resident have a bedside stand, reading light, chest of drawers and a comfortable chair?				
11. Is closet space sufficient?				
12. Is additional storage space available if needed?				
13. Is there room to maneuver a wheelchair easily?				
14. Is there a nurse's call button near each bed?				
15. Can residents add personal items to the room (e.g., furniture, pictures, televisions)?				
16. Are provisions made for privacy (e.g., cubicle curtains around each bed)?				

ACTIVITY PROGRAMS

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Are activity calendars posted?				
2. Does the home have trained activity personnel?				
3. Are activities offered that interest the prospective resident?				
4. Do you see evidence that residents are involved in a variety of activities?				
5. Are residents involved in meaningful activities?				
6. Are activities available in the evenings & on weekends?				
7. Do residents appear to be enjoying what they are doing?				
8. Are leisure/recreational materials accessible to residents?				
9. Are there planned outings?				
10. Do residents participate in planning the activities?				

11. Do residents have the opportunity to participate in community activities outside the nursing home?				
12. Are activities planned for residents who are confined to their rooms or beds?				
13. Is there a resident "store"?				
14. Do residents take part in its operation?				
15. Are arrangements made for residents to practice their religious beliefs?				
16. Are activities included in the daily rate?				
17. Are activities age appropriate?				

RESIDENT LOUNGE AREAS

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. How many lounge areas are available for residents?				
2. Is there sufficient space in the lounge for visitors, conversation, TV watching, etc.?				
3. Are areas available that permit the resident to meet privately with visitors?				
4. Are lounges clean, comfortably furnished and generally pleasant?				
5. What is the facility's smoking policy?				
6. Is there an outside area available for residents that is safe, secure and inviting?				
7. If the resident is nearing the end of his/her life, is there space for the family to rest? Is there a place for the family to be together for extended periods of time?				

DINING - MENU - FOOD

Visit the facility during mealtime and observe the facility's food service options.

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Is the dining area pleasant, comfortable, clean, well-lit and easily accessible?				
2. Are residents encouraged to eat in dining areas?				
3. Is the dining atmosphere relaxing (i.e., mealtimes do not appear chaotic or rushed)?				
4. Can residents choose with whom they will eat?				
5. Are tables convenient for wheelchairs?				
6. Are dishes and silverware used, rather than disposable plates & utensils?				
7. Do residents have a choice about the food they are served?				
8. Is the meal served the one that is listed on the menu?				
9. How often does the menu change?				
10. Are fresh fruits and vegetables served in season?				
11. Are between meal snacks available?				
12. Are hot foods served hot and cold foods served cold?				
13. Does the food look appetizing?				
14. Does it smell appetizing?				
15. Will the home serve wine/beer with a doctor's order?				
16. Do residents appear to enjoy their meal or do many leave large portions of their food untouched?				
17. Do staff provide assistance with eating (if needed)?				
18. Can residents eat in their rooms if they wish?				
19. Can the resident's family dine with the resident?				

20. Are provisions made for residents who are ill and unable to eat in the dining area?				
21. Is consultation with a nutritionist/dietician available?				

RESIDENT ADVOCACY

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Is there a resident council?				
2. Does it influence decisions about resident life?				
3. Is there a family council?				
4. Is the family council active?				
5. Does it influence decisions about resident life?				
6. Are residents informed about how to report complaints? (Obtain sample of form)				
7. Has the home provided you with a copy of the residents' bill of rights?				
8. Is there an active volunteer program?				
9. Do staff involve the resident (or family or guardian, if appropriate) in care planning?				
10. Is information posted about community care alternatives?				
11. Are the phone numbers of the State Ombudsman and other resident advocacy groups posted?				
12. Will the nursing home honor the resident's preference for advance directive decisions?				
13. Are staff able to communicate with residents in languages other than English?				

MEDICAL & NURSING SERVICES

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Will the prospective resident's physician visit the home? If no, who does? _____				
2. Is a registered nurse available 24 hours a day?				
3. Can the resident choose the hospital they wish to use?				
4. Can the resident choose the pharmacy they wish to use?				
5. Are the following nursing services provided:				
- A program to promote continence of bowel and bladder?				
- A skin program to prevent pressure sores?				
- Repositioning residents who are bed-ridden?				
- Assisting residents to adjust to their disabilities?				
- Teaching maintenance of daily living activities such as feeding, grooming and dressing?				

REHABILITATION SERVICES

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. If therapy is needed, does the home provide an appropriate program or make the services available?				
2. Are a variety of therapies available (occupational, physical, and speech therapy)?				
3. Is there a variety of equipment for therapy?				
4. Is there evidence that it is being used?				
5. Do staff provide therapeutic activities (e.g., walking residents, range of motion)?				
6. Are therapeutic activities provided to keep residents restraint-free?				
7. Is there a licensed physical therapist available?				
8. Is there a licensed occupational therapist available?				

9. Is there a separate therapy room available?				
10. Are the therapy rooms clean?				

BATH AND SHOWER ROOMS

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Are bathrooms conveniently located?				
2. Are toilets convenient to all rooms?				
3. Do bathrooms have handgrips or rails near all toilet and bathing areas?				
4. Is there a nurse's call button near the toilet?				
5. Do bathrooms have showers/tubs? If not, ask to see the shower or tub room.				
6. When and how often do residents receive baths or showers?				
7. Are residents given a choice about bath/shower schedules?				
8. Are residents given a choice between a bath and a shower?				

PHYSICAL PLANT

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Is the home in good repair?				
2. Is the temperature acceptable?				
3. Is the noise level acceptable?				
4. Are there areas for privacy?				
5. Are telephones available and private?				
6. Are telephones accessible to all residents (including those in wheelchairs)?				
7. Are halls and stairs well lit and clean?				
8. Do halls accommodate the passage of wheelchairs?				
9. Are halls free of obstacles such as cleaning equipment, chairs and laundry carts?				
10. Are there handrails in all hallways?				
11. Are exits and stairways clearly marked?				
12. Are fire extinguishers visible?				
13. Do you see a sprinkler system in the home?				
14. Is there an emergency evacuation procedure?				
15. Does the home have fire drills?				
16. Is there a system in place for residents who wander?				

STAFF

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Were the staff prompt and courteous when meeting you for your appointment?				
2. Does the administrator know the residents?				
3. Does the staff show interest in individual residents and know them by name?				
4. Do residents talk freely with staff?				
5. Does the staff look for and promote responses from residents (e.g., eye contact, attempt to complete a task, etc.)?				
6. Does the staff treat residents with dignity and respect?				
7. Does the staff assist residents according to the residents' apparent needs?				
8. Is privacy respected (e.g., staff knock on doors before				

entering rooms, keep cubicle curtains drawn while care is given, etc.)?				
9. Does the staff respond to calls for assistance quickly?				

MISCELLANEOUS

	HOME 1		HOME 2	
	Yes	No	Yes	No
1. Does the home have a staff social worker?				
2. Does the social worker know the residents?				
3. What duties does she/he perform?				
4. Is transportation provided for trips to the hospital, medical offices or community functions? - Is there a transportation charge?				
5. Are podiatry, eye care and dental services available?				
6. Does the home have arrangements for personal laundry?				
7. Are beauty and barber shop services available? - At a cost? - How often?				
8. Are young children permitted to visit?				
9. Do community groups, such as Boy or Girl Scouts, visit the home?				
10. Are the residents' pets permitted to visit?				
11. Does the home have any pets?				
12. Does the home provide orientation and ongoing support for the resident's family?				
13. Are reading materials and newspapers available?				
14. Does the home offer fund management services?				
15. Is mail delivered Monday through Saturday?				

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